Chemist & Drugst

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JANUARY 29 1977

THE NEWSWEEKLY FOR PHARMACY

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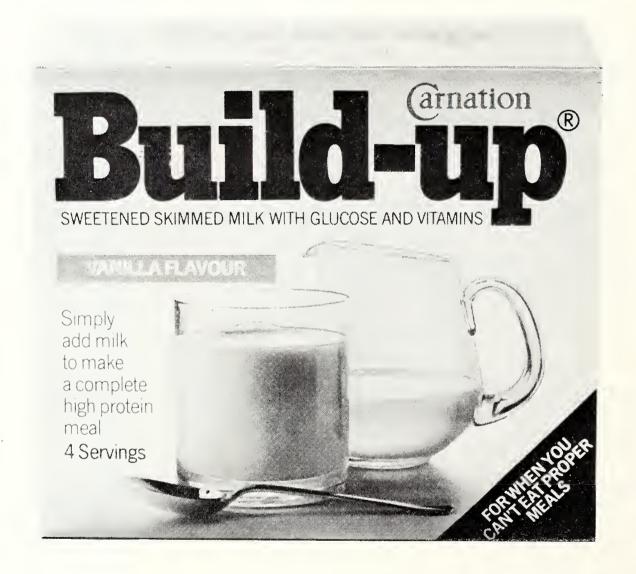


PPA report: more details

PSGB, JBPA evidence to Commission

Three to be struck off the Register

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Chemist & Druggist

The newsweekly for pharmacy

29 January 1977 Vol. 207 No. 5051

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Comment

Pricing prompt

Congratulations to Mr R. I. Tricker for producing his report on the Pricing Prescription Authority in such a short space of time (last week, p68 and this week, p106). His task was largely single handed with advice from Mr J. Charlton (secretary of the Pharmaceutical Services Negotiating Committee), and Dr W. G. A. Riddle and Mr S. H. A. Shaw representing the medical profession and the Whitley Council, the other parties concerned.

Unfortunately for the report (but fortunately for chemist contractors), many of the proposals designed to reduce the backlog of prescriptions would seem to have been pre-empted by the PSNC's recent statement that pricing, in England, at least, should be up to date within three months. Mr Tricker proposes "sample" pricing, for example, as a "temporary" measure. But experience shows that measures introduced to deal with a temporary setback often remain for longer than originally envisaged, and few contractors would accept sample pricing on a long term basis.

Mr Tricker recommends computerisation for the long term, mainly for information purposes, with speedier payments as a "spin-off"—even though the PSNC in its evidence suggested that accuracy and speed are not likely to be improved. Again pharmacists will feel a touch of apprehension as a result of experiences with computers inexpertly handled.

Pharmacist endorsement?

Several methods of data capture are proposed by Mr Tricker with a recommendation to set up an investigative team as soon as possible. The most likely method would appear to be coding endorsed by the pharmacist. Although pharmacists must approve any increase in "professional involvement" in dispensing (with suitable remuneration), such "clerking" operations hardly fall into that category. Nevertheless, coding in Northern Ireland has produced positive benefits for chemists in terms of the statistical information available to them. Equally, computerisation could provide contractors with a more comprehensive pricing statement which might allow better business use to be made of it. It is, after all, the contractor's money that is the subject of the calculation so who, if not he, has a right to know the method of that calculation?

At first sight contractors will react strongly against the report's proposal to maintain the number of pharmacist members of the Pricing Prescription Authority at three and reduce the FPC representatives from eight to two. In the past these have often been pharmacists, resulting in a present total of eight pharmacist members. However, there need be no concern, providing the three pharmacists are sufficiently forceful to make their points stick. Quality rather than quantity should be of the essence in working groups

such as the PPA!

Premises costs: the consultants' proposals

A warning that proposed changes in the method of reimbursing chemist contractors' premises costs could have an adverse effect in some cases, has come from the consultants who prepared a report on reallocation for the Pharmaceutical Services Negotiating Committee.

A summary of the report, received as C&D went to press, has been circulated to members of Local Pharmaceutical Committees, as promised at the LPC conference in November 1976. The summary of conclusions and recommendations of the consultants, Coopers and Lybrand Associates Ltd, is as follows:

☐ The formula for the calculation of rent and notional rent is based on outdated values and so fails to cover costs and provide a market return to the owner; current rental values in 1975 were 1.03p per prescription more than those calculated under the present method;

☐ The majority of contractors are required to open outside normal working hours to dispense NHS prescriptions. As during these hours the premises are almost entirely used for NHS dispensing the property costs related thereto should be wholly chargeable to NHS dispensing; the effect of this would have been to increase costs per prescription, in 1975, by 0.25p;

☐ Since the current formula came into operation the volume of dispensing has increased more quickly than the other activities undertaken by the contractor, but the area allocated for "common space" has remained the same; if common space were allocated in accordance with turnover, this would increase the costs per prescription, in 1975, by 0.51p.

☐ The financial effect of the proposals on the amount due for 1975 would have been to increase cost per prescription by 1.79p. ☐ The use of average property costs obtained from the inquiry and their application to all contractors results in a contractor practising in a high rental area being penalised. Rent, notional rent and rates should be omitted from the present cost averages and be the subject of an individual premises allowance paid to each contractor based on the current rental value of the premises occupied and the actual rates paid.

Some payments reduced?

However, in a covering letter the consultants warn that while the latter proposal would lead to contractors being reimbursed for their actual costs it could: (a) reduce the actual amount paid to contractors in low rental areas; (b) possibly reduce the overall amount payable to contractors, particularly compared with using either a current rental formula or current cost accounting; (c) be administratively time consuming and costly both to contractors and to the DHSS and this

would probably make the suggestion unacceptable to the DHSS. "We therefore consider that, as the DHSS have notified you that they will accept current cost accounting when it is introduced, it may be in the best interests of contractors, particularly the smaller ones owning their own shops, to continue with the average basis of payment."

The PSNC's answer is that the possibility of a reduction in the amount paid to contractors in low rental areas was recognised in PCL 9/76, where it was stated that the basic practice allowance could be increased to maintain the position of the smaller contractor.

"It is most unlikely that the overall amount payable to contractors would be reduced by a change from cost reimbursement on an average basis as at present to an individual basis per the premises allowance. Any renegotiation of the basis of cost allocation as recommended by the consultants would increase payments to contractors and the position could be further reviewed on the introduction of current cost accounting."

The PSNC agrees that the introduction of the Premises Allowance would involve more administration costs "but agreement with the Department on restriction of the right of entry into contract may overcome this difficulty."

Doctors—pharmacists: the correspondence continues

Mr Jim Bannerman, the Pharmaceutical Society's president, was expected to have a letter published in this week's *Pulse* in reply to Dr Adrian Rogers' earlier attack on pharmacists (C&D, January 22, p32).

Mr Bannerman had questioned seriously whether to reply to the "remarkably ill-informed and offensive article", but so many doctors had contacted the Society, dissociating themselves from Dr Rogers' views, that the president felt he ought to put the record straight.

A "feud" was the last thing pharmacists wanted; if there was any argument it was only with the young man who had launched "a personal and abusive campaign against an allied profession".

"In one of his brashest and most offensive assertions Dr Rogers limits the qualifications of a dispenser to someone who need merely be 'literate and intelligent and preferably tall enough to lift things off shelves safely!' So much for public protection. I leave you to judge the arrogance of any professional man who would be prepared to describe the role of another profession in such a patronising fashion."

The president questions whether surgeries are more convenient than pharmacies whose opening hours of 9am to 6pm are much more extensive than surgery hours. And patients do not need to make an appointment to get prescriptions dispensed. Mr Bannerman closes his letter with the hope that *Pulse* will not readily accept for publication articles "which can in the end only do a great disservice to our two professions and the public."

In the second article of a series on how to set up a dispensing practice, published in *General Practitioner* last week, Dr John Holland, Byfield, Northants, acknowledges that "the good modern dispensary must be as well equipped as the average pharmacy if it hopes to meet the needs of the local community". At least three months preparation was necessary, he says and recommends obtaining drugs daily from wholesalers or a neighbouring chemist.

A letter from Miss Maureen Tomison, head of the Pharmaceutical Society's publicity is expected to be published in this week's General Practitioner. She points out that the Society's great concern is to ensure that the Clothier committee is given chance, in a cool, calm manner, to reach a conclusion satisfactory to both professions and that the letter was written "more in sorrow than in anger".

When Dr Conrad Harris, St Mary's Hospital Medical School, London, asked a small group of gps "who is interfering with your patients?" chemists were mentioned among the culprits for telling customers not to bother getting some of the items on their prescriptions. In the latest MIMS Magazine, Dr Harris says doctors must remember they are not the only profession with growing pains. "Health visitors, social workers, chemists, lawyers, the police and journalists are all involved in difficult transformations. They are therefore less likely to be concerned with how considerate they are of each other. They need time to evolve, but whether any stable position is possible is an unaswerable question.'

Two-branch chemists win training award

A Lancashire private pharmacy with only two branches has won the Distributive Training Award—the first small pharmacy to have done so.

Mr A. K. Fletcher—who owns the shops in Preston and Leyland in conjunction with his father—and his wife decided to try for the award to obtain a return on their compulsory levy to the Distributive Industry Training Board. Mrs Fletcher undertook a two-day course to become a trained instructor and then set about organising training for the six girl assistants at one of the shops. Mrs Fletcher told C&D on Tuesday that she felt it was definitely worthwhile to go in for the training and the award; she added that a lot of other chemists could qualify.

Pharmacist found dead

A 61 year-old pharmacist was found dead with stab wounds last Saturday morning at his home in Blyth, Northumberland. Mr Norman Rea, who qualified in 1949 and who lived at 31 Newsham Road, Blyth, was a bachelor who was employed by North Eastern Co-operative Chemists Ltd. He is though to have disturbed an intruder.

JBPA wants employees on PSNC

Employee pharmacists should be represented on the Pharmaceutical Services Negotiating Committee, says the Joint Boots Pharmacists Association in evidence to the Royal Commission on the NHS.

JBPA believes the committee is not "representative of the general body of the chemists", bearing in mind that over a quarter of prescriptions are dispensed by employee pharmacists whose numbers are increasing, particularly the number of women.

Salaries negotiated under NJIC agreements for retail pharmacists should be relative to those used in negotiations for total remuneration of contractors by PSNC in negotiations with the Department of Health, JBPA believes, adding that NHS remuneration should recognise the hours of service and free availability of retail pharmacists.

Other points recommended are—preservation of the traditional role of the pharmacy in the community; limitation of contracts to preserve the existing services n areas surrounding health centres; no pharmaceutical services in health centres where existing services are satisfactory; an agreed list of medicines which the pharmacist may supply under the NHS without consulting a doctor; doctors should only be permitted to dispense in areas where a pharmaceutical service cannot be provided; more delivery services should be established and paid for by the NHS.

Net loss of 215 pharmacies during 1976

There was a net loss to the Pharmaceutical Society's Register of 20 pharmacies last month, bringing the net total of losses during 1976 to 215 compared with 288 pharmacies lost in 1975. Of the closures during December, three were in London, 22 in the rest of England, two in Scotland and four in Wales; three of the newly registered premises were in London, six in the rest of England, one in Scotland and one in Wales. During the year there has been a net loss of 26 pharmacies in London, 149 in England, 31 in Scotland and nine in Wales; the number of pharmacies on the Register at the end of 1976 was 10,947, the total having dropped below 11,000 in October.

OFT proposes new laws on pricing without VAT

Mr Gordon Borrie, director general of the Office of Fair Trading, has proposed new laws to require the inclusion of VAT in prices and quotations.

Miss Jane Harper, assistant at A. Thompson, MPS, pharmacy, Dinnington, Sheffield, with her mother to receive 1st prize, a Mini in the recent Fabergé competition. Presenting the prize is Mr N. Watermann, Fabergé managing director



The proposals, contained in a reference document to the Consumer Protection Advisory Committee, suggest that when prices are advertised, displayed or quoted, the total amount to be paid, including VAT, should be given, and failure to do so should be a criminal offence. However, the proposals do not cover prices quoted by one trader to another and they do not suggest it should be compulsory to show prices. The CPAC is inviting written representations on the proposals prior to reporting to Mr Roy Hattersley, Secretary of State for Prices and Consumer Protection. Representations should be sent to the Committee's secretary, Room 523, 1 Victoria Street, London SW1H 0ET by February 16.

Boots celebrate centenary

Boots the Chemists are celebrating their centenary as retailers in 1977. Although Boots Pure Drug Co was not registered until 1888, it was in 1877 that Jesse Boot took over his mother's shop at 38 Goose Gate, Nottingham. Centenary events involving customers, staff and suppliers will be mounted throughout the year, built around the life and ideas of Jesse Boot and the way those ideas have developed in the past 100 years.

'Bullock' proposals for industrial 'democracy'

Employees should be represented on the boards of private sector holding companies -or large subsiduaries—employing more than 2,000 people, according to a report published on Wednesday.

The Report of the Committee of Inquiry in Industrial Democracy (HM Stationery Office, Command 6706, £3) under the chairmanship of Lord Bullock, in a majority opinion, proposes that where this right is exercised the board should be reconstituted to include an equal number of employee and shareholder representatives; a third mutually-agreed and smaller group of co-opted directors would also be included. All directors would have the same responsibilities to the company and would be obliged to consider the interests of shareholders and employees.

Employee representatives would be employees of the company—not full-time trade union officials—and they would not receive special directors' fees on top of their normal pay; however they would have access to secretarial and similar services. "Two tier" boards are not recommended by the majority report, but are by the minority.

ABPI director criticises over-prescribing

The pharmaceutical industry cannot support or defend overprescribing, misuse or waste of drugs, according to Dr R. Arnold, director, Association of the British Pharmaceutical Industry.

Speaking to the Pharmaceutical Marketing Club last week, Dr Arnold said whatever Government was in power, that attitude would still be the same. "It is not a temporary problem arising from the economic crisis, and we shall have to face the consequences of increasing pressure on doctors' prescribing habits. The only responsible reaction which the industry can make is to use promotion to persuade doctors not just why but also how and when they should prescribe and use a particular product. In addition, patients must be urged to comply with the drug regime prescribed for them.

Speaking on the Patents Bill (see pl20), Dr Arnold argued that the "Section 41" powers—Clause 49 in the Bill—do not safeguard the right of the State to use a key invention in times of special national need, nor did they act as a protection against abuse of monopoly. "The inclusion of Clause 49 against the specific recom-mendation of the Banks Committee has been done by the Government we believe for purely political reasons." He added

that the industry would be making strenuous efforts to get the clause taken out.

Turning to the Voluntary Price Regulation Scheme, Mr Arnold said the present scheme would continue until this October and could then be renegotiated. It was well recognised, he continued, that there is concern that the present scheme tends to penalise successful exporters—since success in export markets diluted the capital base on which UK profits were determined; "The present scheme tends to favour the less efficient company".

On the proposed cuts in promotional expenditure he felt that the "first stage" reduction from 14 to 12 per cent would have only a modest effect. The UK market increased by roughly 25 per cent last year, mainly from price increases, and a further 20 per cent increase had been predicted for 1977. "I believe most companies would not have wished to increase their promotional spending to keep up with the increased turnover at the present time even if they had been permitted to do so, and I think the percentage of promotional expenditure to sales would have fallen naturally. I am not sure that the same can be said of the second stage reduction which could cause a considerable re-think by companies."

Tricker inquiry report

Pharmacists too numerous on PPA?

A reduction in the number of pharmacists on the Prescription Pricing Authority is recommended by Mr R. I. Tricker in his report, published last week, of the inquiry into the PPA. The Minister's statement on the report appeared in last week's C&D.

At present eight of the twelve members are pharmacists, (consisting of three by right and five FPC representatives) but Mr Tricker, director, Oxford Centre for Management Studies, suggests that without an increase in size, the range of representation should be broadened to include three pharmacists, two family practitioner services administrators, three gps (not more than one dispensing gp), one employee, one lay member (not restricted to people with NHS experience), one DHSS representative and one representative of academic and research interests in the field eg a pharmacologist. The reports suggests that members should be eligible for a financial loss allowance, and that the chairman should be appointed by the Secretary of State, not elected as now.

Mr Tricker says he was surprised to discover that the contractor does not receive a remittance advice detailing the PPA calculations of net ingredients supplied. He felt that the contractor could be better able to run an efficient and profitable business if the basis of payment were simpler and easier to follow with more information provided.

The simplification of broken bulk and oxygen prescription procedures is also recommended since their cost effectiveness is open to question, the report says.

Sample pricing of the less expensive prescriptions from the larger sized bundles, with full pricing of the remainder, could, within similar limits of accuracy to the present, produce effort savings of about a third. Mr Tricker recommends that this method should be studied further as soon as possible to provide a short term improvement in the pricing delays.

Computerisation

Long term the report recommends computerisation which should be related to potential benefits to the NHS and Government, particularly in relation to curbing the national drug bill. The main reasons for computerisation are: by the existing system, a new pricing bureau would need to be opened every 18 months (at present day costs of £250,000) to meet demand; the lack of suitable staff may not improve and recruitment at present depends on the high unemployment factor; the functions of the PPA should include provision of information on dispensing activities, prescribing practice and drug usage which could cut the nation's drug bill, but is at

present beyond the Authority's capacity.

Doctors, in their evidence, have claimed that with better and more up to date information savings could be effected. Mr Tricker estimates these savings at £400m per annum—more than adequate to cover computerisation and with the additional benefits of chemists being paid more quickly and easier new drug monitoring.

The main problems with computerisation would be to provide the drug reference information from the prescription. The report suggests several methods: Doctors could add a code by reference to an up to date list. That is dismissed because of the change in prescribing habits required "and other obvious difficulties". Chemists could provide a code from a list (such a system already operates in Northern Ireland) but evidence suggested that they would object and in any case "would seek a fee" for this work. Chemists could add a precoded label supplied with the manufacturer's container or a direct terminal could be utilised in the dispensary and could provide stock control. The report recognises that every pharmacy would need appropriate equipment, requiring capital outlay and staff training.

The PPA could provide the code which would still reduce the manual calculation of the present system. Alternatively, the PPA index could be bar coded and the information transferred by light pen. This involves no change in procedure for doctors, pharmacists, patients or manufacturers. Costs would not be saved in the short run but additional information would be cheaper at the margin. Visual display keyboard techniques could also be utilised.

Mr Tricker says he is convinced of the feasibility, importance and urgency of cmploying computer-based data processing. Other countries have achieved significant benefit in reducing staff on clerical operation and improved management through better information. He

points out that there are many drug reference codes in existence—Chemist and Druggist, manufacturers, wholesalers, PPA code to the DHSS computer—and that a standard code would eventually be required.

The report states that cooperation between interested parties in presenting the information to PPA in a machine readable form would reduce the Authority's workload. Mr Tricker does not evaluate the suggested methods of data capture but recommends a team be set up to produce proposals for data entry as soon as possible.

Management reorganisation

PPA management reorganisation, with less emphasis on pharmaceutical qualification and more on management expertise, is proposed in the report, as is a reorganisation to enable a PPA to deal with all work arising from all FPCs in one region. The ultimate aim would be to have close cooperation between pricing divisions and the FPCs they serve and where convenient close proximity.

Amongst the evidence supplied to Mr Tricker was a suggestion that chemists should be paid on invoices received but the objection to this was that the PPA would in effect be paying for restocking including non-NHS goods. Alternatively the chemist could price his own prescriptions but he would need an up to date price list and would require payment, which would probably cost more than if the PPA did the work. It would, however, reduce the PPA's work.

Reimbursement to the patient after he pays the full price of his prescription would ensure immediate payment to the contractor and the patient would be better informed on the price of treatment. Repayments could be by way of Social Security Offices. The report recognises that some patients might be deterred from gaining treatment by this method.

Stamp to commemorate vitamin C synthesis

Important discoveries in chemistry by British scientists are featured on special stamps to be issued by the Post Office on March 2 to mark the centenary of the Royal Institute of Chemistry.

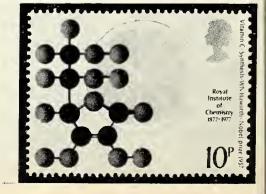
The 10p stamp is devoted to work on Vitamin C by Sir Norman Haworth and his team at Birmingham University, leading to production of the first synthetic vitamin identical with that occurring naturally. Sir Norman was awarded a Nobel prize for chemistry in 1937. The stamp shows a diagram of the molecular structure of Vitamin C with a section of orange in the background.

An 8½p stamp illustrates Professor Sir



Derek Barton's work on conformational analysis. Sir Derek, professor of organic chemistry, Imperial College of Science and Technology, University of London, pioneered the technique which led to an understanding of why molecules adopt preferred shapes or conformations, for which he won the Nobel prize in 1969. The stamp design represents the central part of a steroid molecule against a background of pharmaceutical products and instruments.

An 11p stamp illustrates partition chromatography and a 13p stamp commemorates x-ray crystallography with a model of a salt crystal.



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Pharmaceutical Society evidence to Royal Commission

Ban advertising for proprietary medicines'

The Pharmaceutical Society, in its evidence to the Royal Commission on the NHS, calls for a planned pharmaceutical service and limitation of doctor dispensing to patients with serious difficulty in having prescriptions dispensed by a pharmacist. Similar suggestions were submitted by the Pharmaceutical Services Negotiating Committee (last week, p95).

The Society also wants financial incentives for continuing education and a ban on advertising of proprietary medicines. Another suggestion is that most prescriptions should be limited to 28 days supply with the pharmacist deciding what quantities to dispense. A summary of the recommendations appears below.

1. In view of the unique contribution pharmacists can make to the service, the Commission should clearly support the principle that in the best interests of patients, dispensing of drugs and medicines should be the responsibility of pharmacists.

2. The general public should be encouraged to seek advice on the treatment of minor ailments from persons with knowledge of the health sciences and all advertisements for proprietary medicines should be banned ultimately as advertising can persuade the public to buy more medicines than they need or to take medicines when medical advice should be sought.

Pharmacist's supply list

3. Pharmacists should be helped to extend their contribution to primary health care and thus reduce the cost of medicines provided by the NHS, by the compilation of a list of medicines, currently proposed for inclusion in the POM list, which pharmacists could supply only after discussion with the persons concerned. Details would be recorded in the pharmacy and always be available for inspection.

4. Health education programmes should be introduced to take advantage of the accessibility, knowledge and experience of

general practice pharmacists.

5. To reduce the number of unused medicines in homes and to effect a substantial financial saving within the NHS, 28 days supply or less should be prescribed at any one time.

6. The NHS prescription form should be redesigned to include special sections for the insertion by the medical practitioner of the daily dose and the length of treatment, the pharmacist being required to calculate the quantity to be dispensed.

7. For chronic illness, the proposed three part, repeat prescription pads should be introduced without further delay.

8. Prescription writing by ancillary staff should be replaced by the adoption of the repeat prescription pad. Pharmacists should be encouraged to monitor the effectiveness of the treatment and the occurrence of adverse effects when the repeat prescriptions are presented for dispensing,

9. With a view to maintaining a good general practice pharmaceutical service and reasonable public access to the general inedical services, Area Pharmaceutical Committees should be consulted at the earliest possible stage when the siting of a health centre is considered or when a group medical practice is planned.

10. A decision on whether or not to introduce a pharmaceutical service within or adjacent to a health centre should be based on a detailed study of the current service in the area affected, and it should not be necessary to introduce such a service if the needs of the centre can be met satisfactorily by the existing pharmacies.

11. To ensure that all members of the public have access to the services provided by pharmacists in the community a plan should be introduced to ensure an acceptable distribution of general practice pharmaceutical services. It is the Government's intention that in about 20 years 75 per cent of gps will be in health centres so it would appear that only half of all prescriptions will be dispensed in community pharmacies, inevitably leading to more closures and difficulties to patients. Parttime pharmacies and collection and delivery services could be set up in sparsely populated areas.

12. To support the principles that physicians should prescribe and pharmacists should dispense, dispensing by medical practitioners should be limited to those rural areas where the public would otherwise experience serious difficulty in having prescriptions dispensed by a pharmacist. Regulations that permit doctor dispensing for patients living outside a one mile radius of a pharmacy in a rural area take no account of communications changes in the 50 years since the regulations were first framed. Anomalies arise where patients have to pass a pharmacy to get prescriptions dispensed by a doctor.

Payment for advice

13. To recognise the contributions of pharmacists to primary health care, which are not associated with NHS dispensing or medicine sales, the NHS remuneration of general practice pharmacists should include a significant payment, additional to the total amount currently available, and related to their advisory role and attendance at the pharmacy throughout opening hours; the total remuneration should be sufficient to maintain and encourage further investment to support an acceptable distribution of pharmacies

14. In recognition of the pharmacist's involvement with the general public, there should be a place on each health care planning team for a representative of general practice pharmacy.

15. To enable pharmacists to co-operate with doctors in the monitoring of adverse drug reactions, pharmacists should receive any information on this matter which is sent to doctors by the Committee on Safety of Medicines.

16. To encourage the proper storage and use of medicines by persons unable to collect their prescriptions from a pharmacy, arrangements should be made to include pharmacists in the domiciliary

health care team.

17. Each administrative tier of the NHS should have a permanent officer for each of the major health professions.

18. These officers should be full members of each team of officers.

19. To encourage pharmacists to follow a career in the specialised aspects of hospital pharmacy, it should be possible to progress, in each aspect, to the highest salary award.

20. To assist in the improvement of drug therapy in hospitals the development of clinical pharmacy should be encouraged

by the Department.

21. To encourage improved prescribing habits, hospital and general practice pharmacists should provide suitable instruction to medical students and trainee general medical practitioners, respectively.

22. To foster the relationship between undergraduate and postgraduate pharmaceutical education and pharmaceutical practice, joint staff appointments should be created between each school of pharmacy and the appropriate NHS authority.

Patient safeguard

23. To safeguard patients from the dangers of errors in the administration of intravenous solutions, arrangements should be made to ensure that drugs are added to these solutions by a pharmacist.

24. To facilitate correct therapy with certain drugs, pharmacists should interpret the estimations made of the level of a

drug in a patient's blood.

25. To enable hospital ethical committees to make a proper appraisal of any case involving medication of patients, pharmacists should be included on the committees or consulted.

26. NHS drug information centres at area or regional level should use the information services of the Pharmaceutical Society as their national source, thereby

saving costs.

27. To enable schools of pharmacy to participate fully in postgraduate continuing education programmes for practising pharmacists the NHS should give them direct financial support for this purpose.

28. To encourage more general practice pharmacists to participate in continuing education programmes, the NHS should provide a financial incentive in the form of a postgraduate education allowance.

29. To obtain the maximum benefit from recently qualified pharmacists, the service should fund programmes of practice-related education and training to be arranged by the profession.

30. To meet the special needs of Scotland and Wales there should be close consultation between the responsible authorities and the Society's Executives there.

31. The pharmaceutical industry should be allowed to function in conditions in which safe and effective medicines can be researched, developed and manufactured.

PSNC appointments

As C&D went to press on Wednesday it was announced that Mr A. Smith, MPS, is to become chief executive of the Pharmaceutical Services Negotiating Committee from February 1 and Mr M. D. Brining, MA, FCA, financial executive from the same date. Mr J. Wright is to continue to attend meetings in an advisory capacity.

Mr G. David, Committee chairman, announcing the changes at the January 26 meeting, paid tribute to Mr Wright's hard work and leadership. In reply Mr Wright thanked Mr J. Charlton, his deputy, and Mr Brining for their support.

Mrs Margaretta Wright, MPS, wife of Mr J. Wright, secretary and director National Pharmaceutical Association, has been awarded a BA degree by the Open University. Mrs Wright studied a course in humanities.

Mr J. C. Hodgson, MPS, has retired at the age of 71 and closed his business in Eastriggs, Dumfriesshire, which he ran from 1932.

Deaths

Wheeler: At home on January 24, Dr D. E. Wheeler, CBE, former deputy chairman, Wellcome Foundation Ltd, president of the Association of the British Pharmaceutical Industry 1962-64, Master of the Salters' Company and sometime president, Spastics' Society. He graduated from Bristol University, where he specialised in physical chemistry, and obtained his PhD in 1934. He was then awarded a Salters' Fellowship to study industrial organisation and practice in the USA for two years and on his return he joined the research department of Imperial Chemical Industries (Explosives) Ltd where he eventually became technically responsible for all acid production throughout the ICI organisation in Great Britain. In 1940 he was appointed research and development director of Hardman & Holden Ltd, chemical manufacturers. Joining the board of directors of Wellcome Foundation in 1946, he was appointed assistant managing director later that year, joint managing director in 1948, managing director in 1955 and deputy chairman in 1967. He retired from the board for health reasons in 1970. Dr Wheeler was a member of the Economic Development Committee for the chemical industry, of the CBI Council and the Trade Affairs Board of the Chemical Industries Association. He was awarded the CBE in 1965.

Redoxon prices

C&D regrets that retail prices for Redoxon tablets were not updated with trade prices in last week's Price Supplement. Roche Products Ltd state that retail prices are as follows: 25mg-50, £0·15; 250, £0·36. 50mg-100, £0·32; 500, £0·97; 1,000, £1·78. 200mg—25, £0·28; 100, £0·68. 500mg—20, £0.49; 100, £1.73. Effervescent—10, £0.49; 20, £0.94. Sterling Health Products point out that Delrosa rose hip syrup with blackcurrant is available only in 60z size.

Topical reflections

BY XRAYSER

tavern

Over the holiday season I found myself listening to a very attractive concert, one of a series to be broadcast on Radio 3. The programme was described as a first look at lost London concert rooms and it was devoted to music which was performed in a celebrated tavern in the Strand, famous in pharmacy. It was none other than the Crown and Anchor within whose walls our Society was born. I must confess that, until the broadcast, I had no idea that the Crown and Anchor was any more than a public house, though I hoped it might be a cut above the general run of such establishments. The programme included works by Handel and Purcell and a note in the Radio Times told me that the tavern was the home of the Academy of Ancient Music and the Society of Musicians in the 18th century. There was in the announcement, a drawing of the tavern, and a large and very handsome building it was.

It seems, from William Kent's Encyclopaedia of London, that the establishment was known to Dr Johnson, Sir Joshua Reynolds and others, and that in 1798 a great banquet was held there to honour Charles James Fox. In 1854, the premises were burned down. That I was not alone in my misconception of the Crown and Anchor appeared when I was sufficiently curious to look up an account of the centenary celebrations which took place with the war in its grimmest period in 1941. The president of the Society, in a BBC broadcast, referred to our founders "coming out from the dark passage into the light of the Strand". There may, of course, have been a dark passage, but it was also described as "a large and curious house with good rooms and other conveniences fit for entertainment". And entertainment of one sort or another there has been in plenty since the fifteenth of April, 1841.

Pressures

The pressures being brought to bear by the manufacturers of proprietary medicines to influence the original proposals of the Medicines Commission are effective. Indeed, the PAGB have left no stone unturned in their desire to ensure that their products are available in every shop and store in the country. The organisation has pointed out that any restriction on sale will cause inconvenience and put additional strain on doctors and the health service.

Such consideration is very worthy. But the industry has been fighting an effective rearguard action for a very long time. As long ago as 1946 a pamphlet appeared entitled "Patent Medicines, an indictment", under the name of Hugh Linstead. It was a powerfully written document, in the course of which the then Mr Linstead pointed out that if advice were asked concerning the marketing of proprietary medicines it would probably recommend the choosing of one of the groups of the commonest ailmentsaches and pains, digestive disturbances, etc. Next it would be necessary to choose a good name, preferably one with a scientific ring. The product might take the form of tablets, for they are easily carried about.

"Make certain" the advice would go on, "that your ingredients are of the best quality, their cost being but a small part of your outlay, and see that your pack and labelling are soberly attractive. Have your medicine prepared, packed and distributed by a reputable manufacturer. Above all, employ a first-class firm of advertising agents. You have then done your part and the public will do the rest." The means of advertising has changed, Television now reigns and it is even more powerful than the Press. The methods may have changed, but the purpose remains the same—to influence towards increased consumption of medicines.

Newproducts

Allureli hairspray

L'Oreal have introduced a hairspray called Allurell d'Elnett and describe it as the first real technical development in this area for some years. The company says that although Allurell (135g £0.85, 300g £1.45) is applied and holds like hairspray it cannot be felt on the hair, yet maintains a style all day and brushes out easily. Whereas most hairsprays coat the hair from top to bottom Allurell holds only at specific points on the hair allowing free movement and a soft feel.

An advertising budget of £700,000 will be spent on above- and below-the-line promotional support. The campaign opens with nationwide commercial radio support during the last week of February and the first week in March, together with a trade discount. Television advertising is planned for the last two weeks in March and the first week in April, followed from May to August by full page colour advertisements in women's magazine and followup radio and television spots in September, October and November. In-store promotion will occur during February and March in 600 retail outlets (Golden Ltd, 18 Bruton Street, London W1A 1BY).

Pifco styler dryer 2600

Pifco's latest styler dryer—no 2600 (£12.95)—is their existing tangential hairdryer with a blow-wave attachment only.



The styler dryer no 2500 now becomes the styler dryer plus 5, together with complete blow-wave attachment, detangling comb, fine comb, half-round brush and a separate handle to enable use of combs and brush without the dryer (Pifco Ltd, Princess Street, Failsworth, Manchester M35 0HS).

Grandels Keimdiat wheat germ

Synpharma International Ltd are to market in the UK a range of health foods from Keimdiat GmbH, Augsburg, Germany. Grandels Keimdiat wheat germ (£0.90) is to be introduced on February 1. It is not toasted and contains no preservatives or added substances and the recommended daily consumption is two or three tablespoonfuls for adults, two or three teaspoonfuls for children (Synpharma International Ltd, Castle House, 21 Davey Place, Norwich NR2 1PJ).

Prescription specialities

BREVINOR tablets

Manufacturer Syntex Pharmaceuticals Ltd. St Ives Road, Maidenhead, Berks

Description Each blue tablet contains norethisterone 0.5mg and ethinyloestradiol 25mcg Indications Oral contraceptive

Contraindications Thrombosis, thromboembolic disorders, cerebral apoplexy, or a history of these conditions. Active liver disease. Known or suspected carcinoma of the breast or oestrogen-dependent nco-Undiagnosed abnormal vaginal plasia. bleeding

Dosage For the initial cycle, one daily from 5th to 25th day of menstrual cycle, counting first day of flow as day 1. For subsequent cycles, no tablets are taken for 7 days, then one daily for 21 days. If a tablet is missed it should be taken as soon as possible even if it means taking two together. If two are missed a tablet should be taken as soon as possible and an additional method of contraception used for the remainder of the cycle. If more than two are missed, oral contraceptive therapy should be discontinued immediately and a method of nonhormonal contraception used until pregnancy has been excluded

Precautions Additional method of contra-

ception recommended for first 14 days and, when changing from another oral contraceptive, for the first cycle. Patients should be kept under regular surveillance in view of possibility of such conditions as thromboembolism. Use in epilepsy, migraine, asthma or cardiac dysfunction may result in exacerbation of these disorders, because of fluid retention. Decreased glucose tolerance may occur in diabetics. Foetal abnormalities have been reported in offspring of women who take progestogens and/or oestrogens during pregnancy. Gastro-intestinal upsets may interfere with absorption. Instances of oral contraceptive failure have been reported in patients treated with rifampicin and with anti-epileptic drugs so additional use of mechanical contraceptives is advised if these agents are given concurrently

Side effects Possibly slight nausea at first, weight gain or breast discomfort, which soon disappear. Spotting or bleeding may occur during the first few cycles. Usually menstrual bleeding becomes light and occasionally there may be no bleeding during tablet-free days. Hypertension, usually reversible on discontinuing treatment, has occurred in a small percentage of women on oral contraceptives

Packs 21 tablet calendar pack (£0.36 tade) Supply restrictions P1, S4B Issued February 7, 1977

Nicholas to expand interest in oral hygiene market

Increasing public awareness of the importance of oral hygiene and preventive dentistry is reflected in competitive activity amongst manufacturers of oral hygiene products and the latest major manufacturer to expand in this area is Nicholas Laboratories, who have launched this week a new toothbrush under the Interdens brand name.

"We are well aware" comments Nicholas marketing manager Graeme Hannah, "that we are entering a highly competitive market sector. Nevertheless, by producing what we believe to be a product with distinct consumer advantages with backing from the dental profession and by targetting it at a specific area of the market we are confident of success.

There are currently some 70 different types of toothbrush on the UK market with over 90 per cent of total sales coming from nine brand names. The estimated 50 million toothbrushes sold annually create a market worth at least £6m. About half of sales, in sterling terms, are through chemist outlets.

Nicholas have worked closely with dentists to produce a brush acceptable to them—an angled head allows positive presentation to the teeth in all parts of the mouth, promoting the optimum cleaning action whilst stimulating the gums. The head is small and compact, using medium/soft nylon filaments with rounded ends in a multi-tufted format.

Product sampling

During the launch phase Nicholas Laboratories, 225 Bath Road, Slough, Berks SL1 4AU, are to undertake extensive product sampling through dentists, supported by advertising in the professional dental Press and by a range of consumer leaflets to be distributed via dental surgeries. They anticipate that, initially, most sales will be stimulated by recommendation from dentists that the Inter-dens toothbrush should be used and is available from their local chemist.

Nicholas are also planning a full colour consumer Press advertising campaign starting in April through quality women's magazines such as Good Housekeeping, She, Cosmopolitan and Ideal Home. These plans reflect the aim for "the more dentally-conscious end of the market", as does the recommended price of £0.46. With the anticipated rapid growth in toothbrush sales (the market has the potential to grow to three or four times its present size), Nicholas look for a significant share of the premium sector within the next two years—further professional and consumer Press advertising support is planned throughout 1977 and 1978.

Nicholas also say that the extension of the Inter-dens range is not yet complete and that further oral hygiene products are being contemplated. "We are extremely serious" Hannah concludes, "in our intent to increase our impact in the oral hygiene market and this is very much in line with our more aggressive approach across the entire Nicholas range of market interests."

Trade News

Ortho-novin 1/80 colour change

White tablets of Ortho-novin 1/80 are replacing the lavender coloured tablets. Ortho Pharmaceutical Ltd, PO box 79, Saunderton, High Wycombe, Bucks HP14 4HJ, say that stocks of the lavender tablets should be exhausted prior to using the white tablets.

Frusemide from Cox

Frusemide 40mg tablets (500, £13; 1,000, £25 trade) are the first in a new range of generic products to be introduced during the coming year by Arthur H. Cox & Co Ltd, 93 Lewes Road, Brighton BN2 3QJ.

Footcare boost

A £300,000 promotional budget for footcare products will support Scholl footsprays and rough skin remover during 1977. For footsprays, Scholl (UK) Ltd, 182 St John Street, London EC1P 1DH, will use leading women's magazines throughout the peak summer months until September, with a floor stand dumper display bin taking 36 footsprays.

Special terms currently offer discounts of 10 to 20 per cent, depending on quantity ordered. Scholl say that in unit volume terms, the foot odour market increased by 23 per cent during 1976 and footsprays remain by far the biggest segment with a share of 78 per cent in volume terms. The rough skin remover market increased by 18 per cent.

Rough skin remover will be supported by full and half page colour advertisements in women's magazines from April until the end of August and a counter display unit contains 36 products. Discounts from 10 to 20 per cent are offered.

Nulon relaunch

Nulon is being relaunched by Reckitt Toiletry Products Ltd, Reckitt House, Stoneferry Road, Hull HU8 8DD, with new packaging, sizes and fragrances. The bottle is described as more feminine in design but functional in shape, with a new cap which is said to make it easier to control the amount of the product delivered.



The company believes that consumers prefer larger sizes so Nulon will be available in bottles of 75ml (£0·30), 150ml (£0·45) and 250ml (£0.65). The formulation is unchanged but the two variants have been given new fragrances and real lemon juice has been added to the lemon variant.

costing advertising campaign £280,000 is backing the relaunch and providing eight months of national advertising in women's Press. The first advertisement, timed to coincide with the relaunch, will carry the headline "Take a Nulon refresher course". Nulon now comes shrinkwrapped on polystyrene display trays.

The company is increasing its commitment to sport with Cossack men's hairspray sponsoring the 1976/77 National Football Cup Competition organised by the National Association of Youth Clubs. The competition is being co-sponsored by Football magazine and is known as the Cossack Men's Hairspray—Football Mag-

A new look Lemsip pack has been launched by Reckitt & Colman pharmaceutical division. Both the standard and family sizes show a glass of steaming hot Lemsip in front of all the main ingredients. Point of sale material is available and the new presentation is featured in television advertising on all channels.

15-case minimum from Gillette

Minimum trade prices quoted by Gillette Industries Ltd, Great West Road, Isleworth, Middlesex, are now for 15-case orders. This is the rate listed by the Chemist & Druggist Price Service.

Display by brand share advised

Research shows that the toothpaste market is growing by four per cent in volume, yet chemists' share is not keeping pace with this growth, according to Beecham Proprietaries, Beecham House, Great West Road, Brentford, Middlesex.

The company claims that while grocers are offered the same promotion deals, they seem more alive to relating display space to brand shares—possibly due to lack of awareness of display techniques, chemists appear to give disproportionate space to items with lower market shares.

With that in mind, Beecham suggest that adequate shelf space be given to the new Macleans toothpaste promotion pack, preferably showing all packs face on (not end on), but if space is limited then at least the larger sizes should be preferentially displayed. The promotion offers consumers a cash return direct from Beecham after purchasing, at any price two flashed packs of Macleans Freshmint or Mildmint toothpastes (£0.20 standard, £0.25 large, £0.30 economy or £0.35 glant). Point of sale material is available and the Macleans' "smiles" campaign is due to appear during February and March.

Epicurian seeds range

Carters Tested Seeds, Abbey Dingle, Llangollen, Clwyd, are launching a new range of 36 epicurian vegetable and herb seeds for retail stockists. Called Special Choice (£0·15-£0·50), the range includes such items as sugar peas, capsicum, sweet corn, egg plant, fennel, and alpine strawberry and is to be updated annually. The company feels that a new market for such varieties has been created by the large increase in vegetable growing, coupled with holidays abroad and the proliferation of foreign restaurants.

Carters have allocated a £250,000 budget for above and below-the-line promotion this year. From February until mid-April advertisements will appear in the Sun, Daily Mirror, Sunday Times, News of the World, Sunday Express, and the gardening Press; in addition there will be regional television advertising. In-store display material includes window stickers and wall posters plus a range of stands.

Floral refill

A new fragrance refill has been introduced for Airbal by Temana. The blue refill, floral, fits the standard Airbal globe and has the same RSP as the natural green refill (£0.29). Distributors are Smith & Nephew Ltd, Bessemer Road, Welwyn Garden City, Herts.

Springtime posles

4711 are introducing a 30cc bottle of 4711 Original Eau de Cologne in a posy of spring flowers (£0.99) as a gift for Mother's Day, St Valentine's Day or Easter. A wicker basket for counter display, complete with header-board, holds 12 posies (£7.33 trade).

A new range of Muguet will comprise a spray aerosol of eau de toilette (25g, £1.25) and a phial of perfume (4ml, £0.99). The aerosols are packed in a merchandiser holding 12 units (£9.26, trade) and the perfumes are packed in a counter display holding 18 units (£11.00, trade). On purchase of two outers, the trade will receive a 10 per cent discount from Cologne Perfumery Ltd, Telford Road, Basingstoke, Hants.

Tabu fragrance offer

Dana Perfumes Ltd, 7 Conduit Street, London W1R 9TG, are offering Tabu Cologne sprays (£1.25) in a counter display unit of 24.

Sally Hansen colours

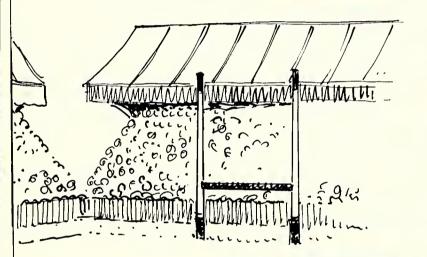
Four colours, two pearl and two cream, have been added to the Hard as Nails with nylon range from Sally Hansen Ltd, Nivea Toiletries Ltd, Surbiton, Surrey. The four colours, iced spice, iced bronze, maroon cream and cherry cream, will be available with a counter unit which will display twelve bottles. There are now 22 shades in this range.

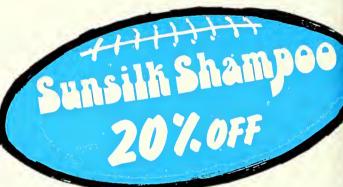
Continued on p116



UniChem Members









Grecian 2000
15% OFF

UniChem MEMBERS v. The REST

PLUS:-

Many

AN ADDITIONAL *6% DISCOUNT IN THE FORM OF PROFIT—SHARING REBATE (* BASIC RATE FORECAST)

OFFERS AVAILABLE
1-25 FEB.

Score Every Time!





Tusty-Tails
14 %. Off







To:	J. A. L. Speller, General Sales Manager,
	UniChem Limited, Crown House, Morden, Surrey

I would like to know how I may share UniChem's profits.

Name ______

Address_____

__Date _____

Industry's big Backache.

In Britain today more people take time o backache than with any other ailment.

Yet relief can be quick and simple with D

For fifty years this tried and tested formul spelt quick and sustained relief from the miserie

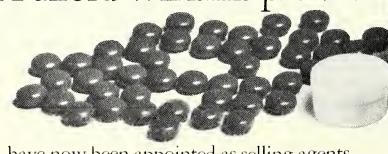
backache, lumbago, fibrositis and muscular rheu And now a limited number of special pad

are being offered at a considerable saving.

So help get the nation back to work with Doan's Backache Pills.

OAN'S

A Fulford Williams product.



Rexnell Ltd. have now been appointed as selling agents.

For further details, write to or phone

Peter Rule, Group Sales Manager, Rexnell Ltd., 32 Powerscroft Road, Footscray, Sidcup, K

est headache.



Trade News

Continued from p111

Q-Tips relaunch

Q-Tips cotton swabs from Chesebrough-Pond's Ltd, Victoria Road, London NW10 6NA, are being relaunched in four new sizes, 20s (£0·17), 60s (£0·35), 105s, (£0·49), 210s (£0.83), in see-through reclosable packs. Introductory bonuses and point of sale units are available. An advertising campaign will begin in March with full and half page colour advertisements in Own, Woman's Woman's Weekly. Woman's Realm, She, Family Circle and Good Housekeeping, supported by continuous advertising in the specialist baby Press. Q-Tips will be given to expectant mothers throughout 1977 via ante-natal clinics and hospital pregnancy advisory departments.

Bleomycin correction

The information concerning extended availability of Bleomycin injection given last week (p78) was, due to a misunderstanding, incorrect. Lundbeck Ltd, 48 Park Street, Luton, Beds, confirm that Bleomycin continues to be available only to hospitals with experience in cancer chemotherapy.

SR chemist only kit

The SR Home Dental Care Kit (£0.76), exclusive to chemists, consists of a 50cc tube of SR, an SR toothbrush and four foil-wrapped plaque disclosing tablets, blister-packed on card giving full instructions for use.

Available from Elida Gibbs Ltd, PO box 1DY, Portman Square, London W1A 1DY, the kits are packed in outers of 12 with bonus terms. The company plans nearly £0.75m of television and Press advertising for SR products.



Doan's backache pills

Special packs of Doan's backache pills from Fulford Williams (International) Ltd, Cornwall Road, Hatch End, Middlesex HA5 4JY, are available now. The pack includes 12 units of the small size which contain 18 tablets, 8 units of the medium size with 48 tablets and two free units of the large size containing 96 tablets (£4.95).

Harmony holiday opportunity

A "Have fun in the sun" competition to promote Harmony hair products will enable 25 couples to have a free week's summer holiday in Benidorm, Spain, each with £35 spending money and a special Champagne reception on arrival. Entrants have to place 10 features of a Benidorm holiday in descending order of merit, say why they like Harmony hair products and enclose two Harmony caps.

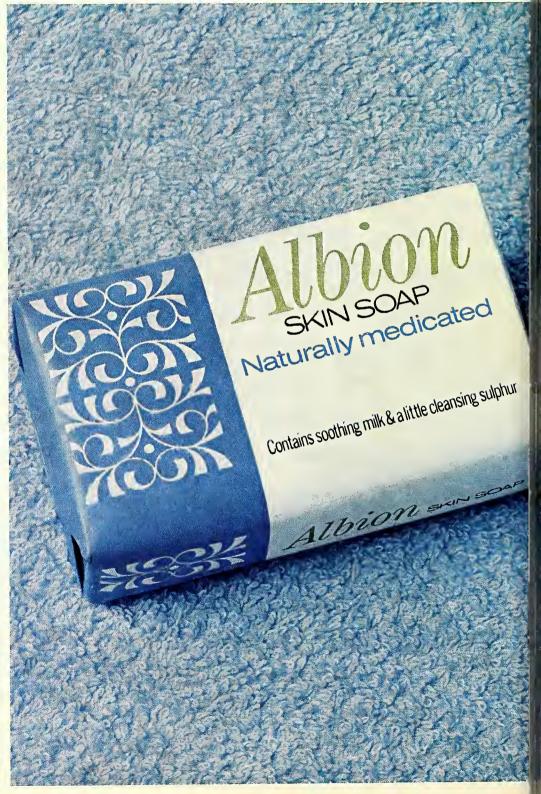
The competition, from Elida Gibbs Ltd, PO box 1DY, Portman Square, London W1A 1DY, closes in the middle of March and winners will travel to Benidorm with Blue Sky Holidays at the end of August. A range of special display material will be available.

Three babymeal additions

Cow & Gate Babyfoods, Trowbridge, Wilts BA14 8HZ, have introduced three new varieties to their range of babymeals. Cheese and celery savoury has been added to the tea time treat range, pears in chocolate sauce is in the toddler range and chocolate pudding has been added to the strained range.

Unichem offers

February "bargain buys" from Unichem Ltd, Crown House, Morden, Surrey, comprise 23 lines. Offered between February 7-25, the products are: Alberto VO5 fruit conditioner, Angiers junior aspirin, Astral cream, Carters Little Liver pills, Crest



oothpaste, Delrosa (rose hip syrup, orange and rosehip and blackcurrant and rosehip), Efferdent, Elastoplast (Airstrip and stretch abric), Famel regular and honey and emon, and pastilles, Head & Shoulders, nterdens, Johnson's Baby Dry liners and hampoo, Kotex Sylphs 10's, Kwells, Matey, Nice 'N' Easy, Nivea sun preparaions (delivery April), Sure antiperspirant, Jnichem pastilles, Wella conditioner.

Apocaire promotions

February offers from Sangers Ltd, Cinema House, 225 Oxford Street, London W1R AE, include Airwick solid, Alberto VO5 hampoo 155cc, Camay bath soap, Colgate ental cream large, Elastoplast stretch and abric family and Airstrip handy, Elnett air spray 500g, Harmony hair colourant, Cleenex toilet tissue, Kotex Simplicity 10, chick Injector blades 5, Wella hair sets 8cc, and Paddi pads 30. Details elsewhere n this issue.

Coupon offers led 1976 promotional campaigns

Promotional activity last year was very much higher than in 1975 in almost every product category measured monthly by MS Surveys and Promotional Services Ltd. Supermarket chains (Boots are included in this category) and independent grocery outlets form the great bulk of stores covered by the research and the detailed results are published in Merchandising and Promotional Intelligence.

Arrangements have been made for the main findings to be published once a month in Chemist & Druggist which incidentally, provides much of the data (via editorial and advertising pages) concerning promotional campaigns current and forthcoming in chemist trading.

There are 22 product groups covered by the MS Surveys system ranging from pet

foods, frozen foods and dairy products, to cigarettes and tobacco. Included are five categories with which the chemist is involved: baby foods, toiletries, cosmetics, hair preparations and shampoos, all medicinal products.

In two or three weeks it will be possible to present the result of last year's promotional activities as a whole, comparing them with those of 1975. However, up to the beginning of December, the "cos-metics" and "all medicinal products" categories were two of the small number of product groups which had recorded a minus result. These were "alcoholic and soft drinks" (1.7 per cent down), "dairy products" (28.9), "all medicinal products" (15·9), "miscellaneous" (5·3), and "cosmetics" (11·4).

The average percentage increase for all the 22 categories last year up to December was 27. "Baby foods" were up 40 per cent, "toiletries" 13 and "hair preparations" and "shampoos" by two.

Types of promotions are also analysed by MS Surveys and 1976 was clearly the year of the coupon. To the end of November, this form of customer-incentive (all product categories) was up over the same period in 1975 almost 60 per cent.

Reduced price offers were up by 34 per cent, self-liquidators by 33, give-aways by 28 and free mail-ins by 26. The "contest" as a technique for inducing the public to buy a product—was surprisingly down over the first eleven months by 4 per cent.

There can be no doubt, even before the figures for December's promotions have been issued, that it was an excellent year for "new promotions" because they came forward at a rate of more than 57 per cent. Since the "running promotions" percentage rate was up by only 27, promotions can be assumed to have been shorter and sharper.

Overall, the introduction of new products during 1976 is going to prove about 35 per cent down on the year before. Included in this minus result will be toiletries, cosmetics, hair preparations and shampoos, and all medicinal products.

Something new, Something old.

ome changes are for the better.

ALBION SKIN SOAP was previously called bion Milk & Sulphur. We did some pretty exhaustive search and came up with an eyecatching new pack d a simplified name.

it the soap's the same.

ankly, some things just can't be improved.



The Albion Soap Company Ltd., Station Road, Hampton, Middlesex.

Ln—London; M—Midlands; Lc—Lancashire; Y—Yorkshire; Sc—Scotland; WW—Wales and West; So—South; NE—North-east; A—Anglia; U—Ulster; We—Westward; B—Border; G—Grampian; E—Eireann; CI—Channel Islands

Anadin: All areas Aspro Clear: All areas

Beecham powders: All except WW, So,

We, E, CI

Contac 400: All areas Complan: All except E Crest: M, So Hedex: All except U, E

Imperial Leather soap: All except E

Milton crystals: U Sevenseas: M, Y, NE Recital: All areas Ribena: All areas

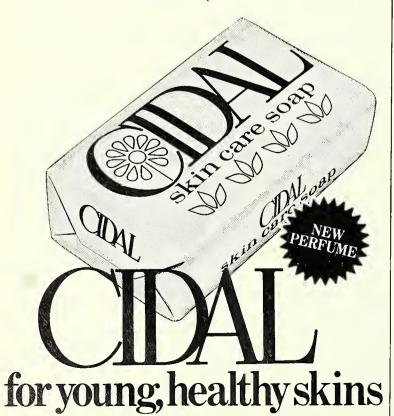
Supersoft hairspray: All except E

Cidal is complexion protection-for all your customers

You know and we know that conventional soaps don't clean skin thoroughly. And now, more and more, they, your customers know it too. As public awareness of skin hygiene increases, a whole new crop of cleansing preparations has sprung up; liquids, lotions-many of which are excellent.

But in this competitive area, Cidal will remain the natural majority choice. Why? Because Cidal's cleansing properties are tried and proven. And now further improved with better lathering qualities and a new perfume.

As a weapon for hygiene, Irgasan medication puts Cidal in the forefront. Within four days' normal use, the skin is cleared of virtually all bacteria. As a soap, Cidal is gentle, producing a soft, rich lather, with a discreet new fragrance. A free counter display unit comes with every case of Cidal you order.



Cidal Products, P.O. Box 4, Liverpool L36 6AE.





For Fashion Jewellery at it's Best all Beautifully Displayed on

Modern floor stands, counter stands, ring spinners. window displays etc all ready for instant operation within minutes of delivery. No fuss or bother. Star Gems do all the work from order to point of sale.

Big Profits Rapid Sales

Make 1977 a more profitable year by contacting us now for our representative to call. Absolutely no obligation, we know that having had sight of our displays you will see and realise what a wonderful asset they will be to your business.

Free

To all new and existing customers, one elegant display of brooches, retail value £50 min. plus normal discount and full credit facilities on all orders over £250. This could mean discount equivalent to 25%. Offer applies on all orders received before April 1st 1977. Remember STAR GEMS are sold in chemists shops throughout the United Kingdom.

STAR GEMS of Leicester Ltd., 160 Melton Road, Leicester. Tel (0533) 667800

Three pharmacists ordered to be 'struck off'

A Bolton pharmacist and county councillor was one of three pharmacists ordered to be struck off the Register by the Pharmaceutical Society's Statutory Committee last week,

Mr Sam Cohen, who trades as Brindles Chemist, Deane Road, and a member of the Greater Manchester Council, was accused by the Society of dispensing a 'rogue' doctor's prescriptions knowing he drugs were being abused. The Comnittee also considered a court appearance by Mr Cohen in February last year when ne admitted four charges involving forged prescriptions.

Mr H. Littler, an inspector for the Society, said he had received a complaint that Mr Cohen had dispensed a prescription for Diconal tablets and that the transaction had led to a death. Mr Cohen said about 4,000 prescriptions passed through his dispensary each month. He had altered prescriptions because they were incomplete or inaccurately filled in by doctors. He and other pharmacists had known the doctor was a "rogue doctor" and were extremely concerned, he said.

Mr Cohen claimed that when he told the police of the number of people who repeatedly visited his dispensary with prescriptions from the doctor (who has since been struck off), the police asked him to continue to take the prescriptions to form

evidence against the doctor.

The Committee's chairman, Sir Gordon Willmer, said that Mr Cohen could not have had any doubt that what he was being asked to dispense was intended to be used in a manner detrimental to health. Assuming a policeman had said on the phone that Mr Cohen should continue to dispense the prescriptions, it seemed inconceivable that a responsible professional man should have refrained from saying he could not because of his obligations to the public, to his profession and to the Code of Professional Conduct.

Addict 'stole drugs'

An addicted pharmacist, Mr Peter Wolstenholme, 23, who "stole drugs", was ordered to be struck off. He had qualified n 1975 and worked at Kershaw (Chemsts) Ltd, Crofts Bank Road, Urmston, Lancs, and as a locum in Birmingham.

In May last year Trafford magistrates fined him £150 and gave him six months imprisonment, suspended for two years, after he admitted stealing 25g of diamorphine from Kershaw's, unlawfully possessing diamorphine and supplying it to a woman without being authorised. Last November at Birmingham Crown Court he was put on probation for three ears for theft of diamorphine and ocaine, unlawful possession of Controlled Drugs and failing to record details in a Controlled Drugs register.

In a letter to the Committee—he did not appear—Mr Wolstenholme said the offence at Kershaw's was due to "a stupid, inquisitive nature" that snowballed into something he could not control. No-one realised better than himself the damage he had done his employers. The Society "carried the can" and he sincerely apologised. He realised he was not a fit and proper person to practise pharmacy.

The Committee confirmed an order made at an earlier hearing but not effective until the January session—that Mr Edward Ah-Ling should be struck off. The delay in making the penalty effective was to give Mr Ah-Ling an opportunity to say why it should not be imposed.

Mr Ah-Ling was superintendent pharmacist and a director of Bayswater Pharmacy Ltd until his resignation last March. The Committee had already ordered that the company's shop in Westbourne Grove be removed from the Register for three years (C&D, November 27, 1976, p731).

Failure to keep records

The Committee reprimanded a Bristol pharmacist for his "shocking failure" to keep proper records in his Controlled Drugs register. The chairman told Mr Frederick John Baber, of Broadleys Avenue, Henleaze, Bristol, that Parliament did not pass the Misuse of Drugs Act, nor did the Minister make Regulations under it, "for fun".

Mr Baber, trading as Westbury Park Pharmacy, in Coldharbour Lane, Redland, Bristol, until last December, appeared before the Committee following his conviction at Bristol Crown Court last April. He was sentenced to nine months imprisonment, suspended for two years. for attempting to pervert the course of justice by falsely entering records of transactions in his drug registers. He was also fined a total of £1,000 for 10 offences of failing to enter items in his registers.

Sir Gordon said Mr Baber made belated and quite futile attempts to falsify the registers by inserting entries which should have been made long ago at the time of the transactions. What Mr Baber hoped to achieve by that was not clear because it would have been found out. His pharmacy was under close supervision by the Home Office and the local police.

Mr Baber told the Committee he was involved in a lot of paper work. He employed locum pharmacists and it was their job to supervise entries made in the registers by an assistant.

The Committee heard that when an inspector visited a shop at Brixton Hill, South London, last August he was sold proprietary medicine containing a Part 1 poison by an 11-year old girl, "supervised" by her 13-year old sister.

The inspector, Mr George Norris, said

the shop was staffed by the daughters of Mrs Mary Naraine, owner of Naraine's Pharmacy Ltd, which had four other pharmacies in South London. The company had been warned by the Committee a year ago that it was in peril of being struck off unless there was a marked improvement in the way the business was run. On that occasion the Committee heard that the company had been convicted on six offences of selling Part 1 poisons when not an authorised seller, in that it did not then have a superintendent pharmacist who was also a director.

The Committee was told the company had since been convicted of five similar offences at Croydon Magistrates Court.

For a period of nearly two months during 1976, the company had failed to notify the Society in writing of its superintendent pharmacist's name, while carrying on a retail pharmacy business. It had now appointed a new superintendent who was registered on January 18.

Mr Norris said the general situation in the company was not satisfactory. Three days after the convictions at Croydon magistrates court he visited all five shops and sales of Part 1 poisons were made at a time when there was no superintendent and without supervision of a pharmacist.

Mrs Naraine told the Committee that Mr Norris called at Brixton Hill shortly after the girl assistant had been called away to help out at another pharmacy. Her daughters were waiting for her to arrive at the shop to take charge. After her husband left in October, 1975, she had tried to run the business but found it difficult to obtain and keep superintendent pharmacists.

The Committee ordered that the company should cease to be authorised sellers of poisons for three years. Sir Gordon said the Committee was far from satisfied that there had been an improvement in the running of the business since a year ago.

The Committee also decided to reprimand Mr Foo Wah Yew, the company's superintendent pharmacist between March and April 1976. Mr Yew, 36, of North Claremont Street, Glasgow, appeared before the Committee a year ago for being involved in one unsupervised sale of Part 1 poison at the company's pharmacy in Gibbon Road, Nunhead, and for being convicted of not paying his fare on the underground.

Testimonial required

A pharmacist working in Sussex was ordered by the Committee to get a testimonial from his present employer. The chairman told Mr Derek Henry Lambert, Lang'ey Parade, Langley Green, Crawley, that he had not complied with their directions at a previous hearing.

Adjourning the case until May, Sir Gordon said they were being generous in giving him another chance. It was not proper for a professional man, such as a pharmacist, to take employment with a professional company without "laying out all his cards on the table" about his past record. In October, 1975, the Committee postponed judgment on Mr Lambert, formerly of Newbury, when he appeared following his conviction for stealing.

The Committee adjourned to its March session the case of Mr James Joseph

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Pharmaceutical Society of Ireland

Congratulations to honoured pharmacists

The president and Council of the Pharmaceutical Society of Ireland, at their first meeting of 1977, expressed heartiest congratulations to their British colleagues Dr F. Hartley, Dr T. D. Whittet and Mr D. F. Lewis, on the distinctions they achieved in the New Year's Honours List. All three have maintained a close interest in Irish pharmacy over the years, it was noted.

The president, Mr M. F. Walsh, announced the Council's decision that the registrar, Mr M. J. Cahill, would in future be known as registrar and secretary, a title which more accurately reflected the functions for which he is responsible.

Mr Cahill reported on various items of correspondence from the Higher Education Authority, including; an additional grant of £3,030 for 1976; and the balance of the capital equipment grant (£5,000). The supplementary grant for 1976 was to cover unforeseen extra costs which had occurred during the year and which had not been budgeted for; these were such items as

interim national wage agreement rises and social welfare increases. A Ministerial Order was received which designated the National College of Art and Design, and the colleges of higher education in Dublin and Limerick as institutions of higher education.

It was decided to rationalise the question of representation on FIP and other overseas bodies. Regarding the forthcoming FIP Conference to be held in the Hague, it was decided that Mr Walsh, Mr J. P. O'Donnell, and Professor R. F. Timoney should attend on behalf of the Council.

The Council heard detailed reports on the present stage of negotiations concerning the transfer of pharmaceutical education to the University of Dublin in October 1977. A joint public announcement would be made shortly, advising students, parents, teachers, etc, of the new arrangements.

Mr Cahill reported with regret on the deaths of Bridget Carolan, MPSI, Margaret McInerney, MPSI, and Michael J. Linnane, assistant.

New Members elected

The following were elected as Members of the Society: Donald J. Dempsey, Therese Josephine Murnane, Patrick Thomas McGee, Abraham Weiss, Julia Ann E. Maher, Richard Anthony M. Phelan, Margaret Mary Sheehan, Cecilia McVeigh, Clare Ann Gallagher, Patrick J. Halligan, Joseph Patrick Dutton, Marie Colette Donnelly, John Francis Doran, Elizabeth Mary O'Brien, Colm Thomas Stanley, Giles Christopher M. Barrett, Ann Geraldine Broe, Noeleen Rose Dargan, and Elizabeth Mary Barron.

Westminster Report

Government determination on patents powers

The Government is sticking to its plan to include "Section 41" powers in forth-coming Patents legislation.

Section 41 of the Patents Act 1949 allows for the granting of compulsory licences for patents relating to medicines. The Lord Chancellor, Lord Elwyn-Jones, spoke on this matter in the debate on the second reading of the Patents Bill—in which section 41 becomes Clause 49—in the Lords on Monday, when he said: "Although the number of applications for licences under Section 41 is small, it is believed that the mere presence of the section operates to stimulate price competition and restrain exorbitant prices."

He continued: "The Government are, however, continuing the discussion they have been having with the pharmaceutical industry and others about the adverse effects that it is claimed the section has on confidence and investment. If, as a result of these discussions, the Government are satisfied that there are more effective ways to prevent the possibility of exorbitant profits being derived from a patent monopoly in the pharmaceutical field, they will be prepared to reconsider Clause 49."

Several Lords spoke against the inclusion of Clause 49. Lord Glenkinglas believed Clause 49 had "no possible purpose" in the Bill. He said the Government's thinking resembled the "house-

maid's baby" argument; "There is so little to worry about that it should not be noticed". He found it more frightening that the Government viewed it as a useful provision in terrorem of the industry doing something wrong; he felt the Government had enough powers to be able to remove that one. He repeated a comment from Lord Lyell who had said earlier in the debate that the cost of medicine in the UK was the lowest in Europe, and that the return on capital in the pharmaceutical industry in 1974 was 14·7 per cent; "It is not very attractive for firms to carry out a considerable quantity of often difficult and sometimes dangerous research for a return of that nature."

Lord Auckland felt the clause was a "positive disincentive" to pharmaceutical companies engaged in research.

Replying to the debate, Lord Elwyn-Jones promised that the comments raised would be taken into consideration. However he added: "If the discussions, which will continue, produce a satisfactory result, then the sanctions in terrorem of retaining Clause 49 will go; but unless we get that satisfaction I am afraid that they must stay."

Sector working party report

The Sector Working Party on the pharmaceutical industry has recently submitted a further report to the National Economic Development Council for discussion at the February 2 meeting, Mr Roland Moyle, Minister for Health, told Mr Michael Grylls on Monday.

Statutory Committee

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Coleman, of Belle Vale Road, Gateacre, Liverpool who did not attend the hearing.

He had been fined a total of £150 when convicted for failing to enter 270 Ritalin tablets in his Controlled Drugs register and unlawfully supplying a total of 70 Ritalin tablets on two forged prescriptions. The Society's chief inspector, Mr J. Dale, said he had been taken off the Society's Register for the non-payment of last year's fees; the issue was whether his name should be restored.

Mr Dale said Mr Coleman applied last month to be re-registered; when he saw him more recently, he seemed to genuinely believe that his name had been restored. Mr Coleman now understood the position.

The Committee admonished a pharmacist who told them that a packet of tablets containing a poison had been sold without his supervision because they had been put on the wrong shelf.

The pharmacist, Mr John Martindale Bateson, appeared before the Committee as superintendent pharmacist of H. M. Bateson Ltd, Cornfield Road, Eastbourne. The company, which had ceased trading, was fined £20, with £57 costs, at Eastbourne Magistrates Court last May.

The Committee took the view that the sale of Panadeine Compound tablets by Mr Bateson's mother, an unqualified assistant in the shop, to an inspector of the Society, without the supervision of a pharmacist, was "an isolated case".

Hospital pharmacist 'took drugs when under stress'

A hospital pharmacist appeared before Cirencester magistrates court last week charged with unlawful possession of Controlled Drugs and failure to keep proper records.

Mr Walter S. Chambers, formerly pharmacist in charge at Cirencester Memorial Hospital, pleaded guilty and asked for 17 other instances to be taken into consideration. It was alleged that Mr Chambers had taken over 4,000 doses of dexamphetamine preparations since March 1976. The defence submitted that he had started taking the drugs as a "tonic" when under pressure both domestically and at work, and had subsequently become addicted.

The case was adjourned pending a social inquiry report. Mr Chambers has been suspended on full pay since October.

More Chanel injunctions

Two London-based chemists, Crosscrest Ltd, and Broadwick Pharmacy Ltd, undertook in the High Court last week not to deal in what Chanel claim is "fake" Chanel No 5 perfume. Their undertakings remain effective until judgment or further order in an action by Chanel claiming infringement of copyright. Similar undertakings were given by three other defendants—Pemberfield Ltd, Mainstate Enterprises Ltd and Orbit Discount—at an earlier hearing.

Letters

General practice research

May I congratulate C&D on its decision or reallocate the award of the Chemist Druggist Medal for Research for preentation of papers relating to the practice of pharmacy. This nicely complements the decision that a session be set aside at the British Pharmaceutical Conference at which research papers on any topic of charmaceutical practice can be presented.

Your editorial Comment (January 15, 31) is at least the third, to my certain mowledge, which you have devoted to necouraging research into aspects of pharmacy practice. For those of us who have truggled to delve deeper into the sociogical, economic and professional procems, these editorials have been noted with no small amount of pleasure and tratitude. How much better it would have been for the image of the profession to have confronted for example, Opit and Farmer and, indeed, currently Adrian Rogers, with a factual and research-upported rebuttal.

Some schools of pharmacy are indeed needested in this research area at postgraduate level and the number is increasing. I applaud therefore your support for his work and would encourage all cademics and others who are motivated by this type of study to take advantage of the Conference session, the offer of publication space and now the added incentive of your Chemist & Druggist Medal.

T. G. Booth, PhD
Pharmacy Practice Research Unit
University of Bradford

Hut' remembered

t was with great sadness that I read of he death of W. M. Hutson. In my various capacities related to the Guild of Hospital Pharmacists at the British Pharmaceutical Conferences I have been "done" by "Hut" on a number of occasions. I think one of he nicest stories I recall was at the time of the British Pharmaceutical Conference n Manchester in 1966. We obtained seats or a Halle Orchestra concert conducted by Sir John Barbirolli and "Hut" was determined that he would do a cartoon of Sir John as part of his double-page spread. I took "Hut" to see Sir John in he interval of the rehearsal. Unfortunately he interval was not long enough for Hut o complete his sketches so, entering into he spirit of the thing "J.B." as he was affectionately known, instructed the heatre manager to sit Mr Hutson with he wood winds.

> T. D. Clarke Regional Pharmaceutical Officer Harrogate

The Editor acknowledges the many other vritten and oral messages of sympathy eceived by C&D.

No room for criticism?

As an "embryo" pharmacist and MIPharmM, I would like to endorse the remarks of Mr N. O. Bond (letters, last week p94). Those who have now grown so very fat on the status quo that they can afford to sit about "representing" the profession in Lambeth and Southgate, are not likely to produce the change in direction, iong overdue and now desperately needed.

Dispensing (and pharmaceutical service) appears to have so small a part in the Southgate grand scheme of things, that it is no wonder that the doctors regard it and us with so little respect. Can we be critical of prescription writing receptionists or even prescription dispensing receptionists when many pharmacists, on the advice of the NPA, appear to spend more time worrying about the shop than supervising equally unqualified dispensers?

I would suggest to Mr Bond that we do not need fewer pharmacies, but the same number distributed better, even next door to rural surgeries if necessary. If planning distribution on that scale means a salaried service, then so be it. At least, then, we could discharge the professional duty for which we have been trained, without fear or favour from the prescribers and without the profit motive creating mistrust on either side of the rural dispensing argument. Those chemists shops (as opposed to pharmacies) that wished to carry on as "traders" should be free to do so without the impediment of the high cost stock and credit of an NHS contract.

S. A. Pleece, BSc (Pharm), MIPharmM Bridgwater, Somerset

By permission?

I see that a future development of Branded Goods' business will be in "ethicals". May I ask if that will be by permission of Glaxo and Vestric?

W. P. Richards Ansun Proprietaries Ltd Newcastle-under-Lyme

GP suggests a health team role for pharmacists

You were kind enough to mention my book "The GP and the Primary Health Care Team" in your editorial comment (January 8) and to quote two or three sentences from it.

The implication of your comment is that any sentences made in my book are to be equated with my opinion. This really only applies to the last chapter which is a philosophical one on the complete primary health care team. It is a pity you did not quote this chapter which has some favourable comments towards pharmacists who so often are the point of first contact of primary care in the total health and welfare chain. The rest of the book is purely a factual manual concerned with the structure of the general practice set-up as it exists now and the functioning of the welfare services in this country.

In writing such a factual book one has to set the scheme in an historical and geographical context and this we tried to do making it clear, I hope, which parts were historical. An example of this is one of your quotes "In former days the doctor employed a pharmacist but the services of a pharmacist are rarely needed to-day". I think you take this to mean that the doctor has no need to-day of the pharmacist's assistance and advice from his shop. What in fact was meant was that the doctor rarely to-day employs a qualified pharmacist in his practice. No-one pretends that this situation will ever exist again but it has to be recorded that dispensing in general practice still goes on to a limited extent for private as well as rural NHS reasons.

With regard to this latter neither as an author nor as a town GP am I qualified to enter into your rural dispensing dispute. As a mere bystander one can see the pro's and con's of both sides but to my mind far more important and rapidly becoming forgotten in the dispute is the patient—and who serves his interests best none of us really knows.

I trust that the above example makes clear that what is written in "The GP and the Primary Health Care Team" is not a personal view on the pharmacist/ family practitioner relationship. If you ask for these, they are basically contained in the statement that it is surprising how well we dovetail together and how remarkably little conflict there has been at any level over the years. This is the more remarkable when we consider how much we depend on each other, how we have to co-operate, how human nature is what it is, and how we both have our backs to the wall-metaphorically the doctor needs tranquillisers and the pharmacist antidepressants, is the best way I can put it. In the last chapter of the book (which is personal opinion and which you do not quote) I recognise the enormous amount of primary care undertaken by the pharmacist. All doctors must be grateful for this because if the pharmacist refused to gives this service, GPs would be swamped and the whole family doctor service would break down. If you wish it I would be delighted to enlarge on this theme in a further edition of the book subject to the publisher allowing the space.

However, my own view is that the matter does not rest there. It is obvious that the "repeat prescription market" will snowball over the foreseeable future, partly due to more drugs becoming available, partly to increased patient awareness of what can be expected of medicine, and partly to the great increase in numbers of elderly patients who use this service. In the book we go to a lot of trouble to try to show how this service should be operated efficiently and safely by the primary health care team, but even in the best of organisations, the work is already badly run by GPs and, through sheer weight of numbers, may get worse. I believe that this service would be much better managed if it were under the control of the pharmacist. A pharmacistorientated service working in co-operation with the community nurse, midwife health visitor and social worker, with the receptionist referring to the GP medical records, is a viable proposition—the neces-

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sary safeguards being constant access to the GP when problems arise by all the above mentioned persons and clear indications when the patient should be referred back to the GP for re-assessment.

The pharmacist would require "therapeutic summary cards" of patients in his pharmacy on which instructions for referral back, etc, would be placed, and what side effects to watch for etc. Clearly the pharmacist would require payment for this extra work but it would be so much better managed than it is by the existing GP-orientated service that the saving in the national drug bill would more than offset the fees. The snag is that it would mean patients registering with one pharmacist who is in competition with all others (but so are GPs and the problem has been overcome for them). Just as GPs have temporary residents and temporary treatment arrangements, so could the pharmacist.

Therapeutic adviser

Finally, one or two small points. I feel that the pharmacist and GP must in future be under the same roof with the pharmacist acting as therapeutic advisor in such matters as drug interactions, unusual dose schedules, side effects, etc. I know that in theory this works, but in practice the physical barriers of the telephone and making the effort to call in on each other largely negate the relationship. The more drugs become effective, the worse their side effects—and the more that are consumed, the greater the argument for this therapeutic advisory role.

In twenty-five years of work only once have I felt like complaining about the services of a pharmacist. (I wonder how many times pharmacists have felt like complaining about me!) However, there are a small number of pharmacists who have little concept of the working administration of general practice and I would be bold enough to suggest that these would benefit by reading "The GP and the Primary Health Care Team".

Dr N. D. Mackichan Tynemouth

Company News

Macarthy's profit steady on increased turnover

Group turnover of Macarthys Pharmaceuticals Ltd in the six months ended October 31, 1976, was £34·966m, 22 per cent above the same period of 1975. Pre-tax profit was £1·217m compared with £1·224m. The chairman reports that trading conditions were fairly quiet during the period and that considerable expenditure of a revenue nature was incurred on properties and computer development in the Romford area. An interim dividend of 1p per Ordinary share is declared.

From the commencement of the second half-year, however, business has been much more buoyant in most parts of the group and a significant improvement in profitability is anticipated.

Ciba-Geigy sales up 5pc

Sales of the Ciba-Geigy Group in 1976 totalled SwFr 9,490m, 5 per cent above the 1975 figure of SwFr 9,040m. Expressed in local currencies, without the effect of parity changes, sales showed a 14 per cent increase on 1975. Sales of individual divisions were as follows: dyestuffs and chemicals SwFr 2,040m (10 per cent above 1975), pharmaceuticals SwFr 2,690m (5 per cent up), agrochemicals SwFr 2,280m (5 per cent down), plastics and additives SwFr 1,610m (17 per cent up), Airwick SwFr 390m (3 per cent up), Ilford (including Gretag) SwFr 480m (equal to 1975).

Sales growth in pharmaceuticals was similar to that of 1975. Despite unfavourable currency exchange rates, earnings improved considerably in 1976 as a result of higher sales and increased efficiency.

Business briefly

Rockware Glass Ltd are to move their head office to Riverside House, Northampton, following the sale of the site at Greenford, Middlesex, to IBM United Kingdom Ltd. A small group head office will be

set up in the London area, and a suitable property is being sought on the outskirts of London. The move is expected to be complete by the end of 1977.

Anglian Aerosol and Packaging Co Ltd have been renamed Anglian Manufacturing Chemists with effect from January 4.

CIBA Laboratories have been given permission by Horsham District Council to go ahead with a new three-storey research building within the existing complex at Wimblehurst Road, Horsham.

G. D. Searle & Co Ltd have occupied an 18,000 sq ft unit for use as a distribution depot at Moston Road, Sandback. This is the first unit to be let on a new estate.

Appointments

Jean Sorelle Ltd: Mr F. J. Lingard has been appointed national accounts manager. He previously held executive appointments with Chesebrough-Pond's and Wella Great Britain Ltd.

Combe International Ltd: Mr John Harold has been appointed marketing controller. He joins the company from Hygcna, and has previously worked with Crookes-Anestan Ltd in toiletries and pharmaceuticals, Boots Co Ltd on the No 7 brand and with Procter and Gamble.

Johnson & Johnson Ltd: Mr C. Wicks has been appointed marketing manager of the baby products division following the promotion of Mr Richard Wheatly to manager of the business development group, a new group responsible for all non-baby consumer business.

Armour Pharmaceutical Co Ltd: Mr B. Beesley has been appointed UK commercial manager. responsible for all ethical division and hospital division marketing and sales. Mr E. Arnold and Mr D. H. Ferguson have been appointed marketing managers for the ethical and hospital divisions, respectively, and will be responsible for the preparation and control of marketing plans and strategies.

Yardiey of London Ltd: Mr Robin Vincent has been appointed deputy managing director. Joining the company in 1958, he graduated in nine years from salesman to northern regional manager and then to sales promotion manager. In 1967 he became product manager, fragrances, and was appointed general sales manager in 1970; two years later he was made UK sales director and in 1973 he also took over as marketing director.



Market

Dearer paraffins

London, January 26: The rates for all grades of medicinal paraffin were raised by 3p a litre for bulk deliveries—by $3\frac{1}{2}$ p in drums—during the past week. Also dearer by a like amount are technical white oils while petroleum jelly has been increased by £4.00 metric ton. Otherwise pharmaceutical chemicals have remained steady at previous levels.

Among spices pepper values fell from their peak level of the previous week. With new crop Nigerian ginger due soon offers are somewhat easier and peeled was again on offer after an absence of several weeks. Cochin ginger however was in demand by Middle East countries and quotations from India are currently extremely high. Noteworthy in aromatic seeds was a big fall in the price of Egyptian cumin, down from £610 metric on to £500 for shipment.

The stronger position of the £ has meant lower prices for some botanicals namely balsams, cherry bark, henbane, hydrastis and witchhazel leaves. On the other hand shortages of stocks have caused rises in Cape aloes, cascara, i<mark>pecacuanha, lobelia and senega.</mark>

The trend of essential oil prices remains firm. English-distilled oils are scarce with stocks mostly committed. A considerable upward move in orange rates is likely soon when the extent of damage to the fruit crop in Florida is known following the unusually intense wintry weather experienced in that State during the past week or so.

Pharmaceutical chemicals
Ferrous fumarate: £1.25 kg for 50-kg lots.
Ferrous gluconate: £1,395 metric ton delivered.
Hydroquinone: One-ton lots £2.43 per kg; 500-kg £2.52 kg.
Iron and ammonium citrate: Granular £903, scales £990 metric ton.
Kaolin: BP natural £109.90 per 1,000 kg; light £4.490 ex-works in minimum 10-ton lots.
Mercurials: Per kg in 50-kg lots: ammoniated £5.70; oxides—red £6.75 and yellow £6.50; perchloride £4.70; subchloride £6.00; icdine £6.20 in £25-kg lots.

Mersalyl: Acid £22.85 kg in 10-kg lots.
Premium for powder £11.00.
Paraffins: Liquid BPC heavy, 1-5 drum lots £0.393
per litre, 6-drums £0.389, in bulk £0.349; light £0.357, £0.353 and £0.313 respectively. Technical white oils per litre for similar lots—WA23 £0.33, £0.326 and £0.286; WA21 £0.344, £0.34 and £0.30 respectively. Petroleum jelly BP soft white £358-£470 metric ton as to grade, delivered UK; yellow BP £342-£4444.

Crude drugs

Crude drugs

Aloes: Cape £1.37 kg spot; £1.32, cif. Curacao spot nominal; shipment £1.85, cif, March-April. Balsams: (kg) Canada: £11.80 spot nominal; £11.70, cif. for shipment. Copaiba: BPC £2.15 on the spot; £2.05, cif. Peru: £6.20, cif. Tolu: £3.80 spot.

Camphor: Natural powder, Formosan, £4.75 kg, spot. Synthetic £0.68.

Cascara: £950 metric ton spot; £920, cif.
Cherry bark: Spot £780 metric ton; £750, cif.
Cinnamon: (cif) Seychelles bark £470 metric ton, cif. Ceylon quills 4 O's £0.69 lb.

Cochineal: Peruvian silver-grey £14.40 kg, spot, £14.00, cif. Tenerife black £21.00, cif.
Ginger: (ton, cif) Cochin £1,065. Jamaican (spot) £1,200. Nigerian split £770 spot, shipment £735, cif. peeled £940.

Hydrastis: (kg) £9.70 spot; £9.60, cif.
Henbane: Niger £1,100 metric ton spot nominal; £1,000, cif.

Ipecacuanha: (kg) Costa Rica £4.15 spot; £4.10, Lobelia: American £1,450 metric ton spot: £1,400,

Lobelia: American £1,450 metric ton spot; £1,400, cif. Dutch £1,380; cif nominal. Menthol: (kg) Brazilian from £11.10 spot; £10.80, cif. Chinese from £12.50 duty paid; £11.20, cif. Pepper: (ton) Sarawak black £1,390 spot £1,300, cif. White £1,560 spot; shipment £1,480, cif. Brazilian black grade one £1,350, cif. Pimento: Jamaican £1,350 ton, cif. Seeds: (metric ton, cif) Anise: China star forward £620. Caraway: Dutch £940. Celery: Indian £560. Coriander: Moroccan £640; Indian £630. Cumin: Egyptian £500, Iranian £535. Dill: Indian £265. Fennel: Egyptian £240. Fenugreek: £145.

Senega: (kg) Canadian £14.40 spot; £14.10, cif. Turmeric: Madras finger £365 ton, cif. Witchhazel leaves: Spot £3.10 kg; £2.90, cif.

Essential and expressed oils

Almond: Sweet in drum lots £1.25 kg duty paid.
Caraway: Imported £19.50 kg; English no supplies.
Cardamom: English-distilled £260 kg nominal.
Cassia: Chinese unobtainable.
Cedarwood: Chinese £1.15 kg spot and cif.
Celery: English £48.00 kg.
Citronella: Ceylon £1.40 kg spot; £1.37, cif.
Chinese £2.10 spot; £2.05, cif.
Clove: Indonesian leaf, £2.50 kg spot; shipment £2.50, cif. English-distilled bud £45.00 spot nominal.
Lemon: Sicilian best grades about £12.50

nominal.

Lemon: Sicilian best grades about £12.50.

Lemongrass: £4.25 kg spot; £4.45.

Lime: West Indian about £8.70 kg spot.

Mandarin: £17.00 kg spot.

Nutmeg: (per kg) English-distilled from West Indian £22.00; from East Indian £20.00. Imported £8.15

£8.15.

Olive: Spot ex-wharf. Spanish £1,350 per metric ton in 200-kg drums ex wharf; Mediterranean origin £1,350; Tunisian £1,350.

Orange: Florida £0.85 kg; West Indian £0.65.
Pepper: English-distilled ex-black £91.00 kg.
Peppermint: (kg) Arvensis—Brazilian £5.50 spot; £5.40, cif. Chinese £5.30 spot and cif. Piperata, American Far West about £24.50, cif.
Sandalwood: Mysore small lots about £85.00 kg spot. No cif offers.
Spearmint: (kg) American Far West £15.50. Chinese afloat £12.50, shipment £11.70, cif. Janfeb shipment.

The prices given are those obtained by importers

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Coming events

Medway Branch, Pharmaceutical Society, Medway postgraduate centre, Medway Hospital, Gillingham, at 7.30 pm. Mr J. F. Smith (lecturer, Sunderland Polytechnic school of pharmacy) on 'Modern dermatological formulae and treatment

Socialist Medical Association Pharmacy Group, Cole Room, Fabian Society, 11 Dartmouth Street, London SW1H 9BN, at 7 pm. Annual meeting.

Tuesday, February 1

Chelmsford Branch, Pharmaceutical Society, Academic unit, Chelmsford and Essex Hospital, at 8 pm. Mr G. Applebe (Pharmaceutical Society) on "Pharmacy law and ethics".

Wednesday, February 2 Crawley, Horsham and Relgate Branch, Pharmaceutical Society, Civic hall, Crawley, at 7.30 pm. Chairman's evening. Speaker: Mrs E. J.

Thursday, February 3
Bradford and Halifax Branch, National
Pharmaceutical Association, Victoria Hotel,
Bridge Street, Bradford, at 8 pm. Mr A. J. Smith,
(chief executive, PSNC) on "Planned
distribution"

M. Leigh (vice-president, Pharmaceutical Society).

distribution Huddersfield Branch, Pharmaceutical Society, Spotted Cow Hotel, New Hey Road, Salendine Nook, Huddersfield, at 8 pm. Dr J. A. Smith (school of pharmacy, Bradford University) on Biological clocks—what makes them tick Hull Branch, Pharmaceutical Society, Grange Park Hotel, Hull, at 7.30 pm. Dinner dance. Leeds Branch, National Pharmaceutical

Association, Golden Lion Hotel, Lower Briggate, Leeds, at 8 pm. Chairman's dinner. Speaker: Mr B. Colehan (BBC producer).

Society of Cosmetic Chemists, Royal Society of Arts, 6 John Adam Street, London WC2A 6AJ, at 6.30 pm. Dr F. Pooley (University College, Cardiff) on "Talc".

Friday, February 4 Glasgow and West of Scotland Branch, Pharmaceutical Society, Staff club, university centre, Strathclyde University, at 8 pm. Branch

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Prevention of theft and staff malpractice in the retail trade: Conference, March 3, Inn on the Park, London W1. Topics include financial justification for security; management approach to security; physical security and credit card fraud. Exhibition of security equipment and technical aids. Fees. £55 plus VAT; details from Miss S. De Bock Porter, Oyez IBC, Norwich House, Norwich Street, London EC4 1AB.

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Conference for senior management of industry and retailing. Royal Garden Hotel, Kensington, London W8, on March 3. (£50 plus VAT). Organised by Forbes Publications Ltd, Office of Fair Trading, Confederation of British Industry, Institute of Marketing and Retail Trading Standards Association. Details from Forbes Publications Ltd, Hartree House, Oueensway London W2 4SH.

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